PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/653,222			ing Date 03/2003	To be Mailed
	Al	PPLICATION .	D – PART I		SMALL	ENTITY	OR		HER THAN ALL ENTITY			
FOR NUMBER F			UMBER FIL	.ED	NUMBE	IBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A	/A		N/A	l	N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A			N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A	•		N/A		N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		mir	minus 20 = *				x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	m	minus 3 = *			l	x \$ =		1	x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C			size fee due each ereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		]	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	04/15/2009	CLAIMS REMAINING AFTER AMENDMENT	NING NUMB PREV		iLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ME	Total (37 CFR 1.18(i))	* 8	Minus **		-	- 0		x \$ =		OR	X \$52=	0
Ζ	Independent (37 CFR 1,16(h))	• 1	Minus	···12		= 0		x \$ =		OR	X \$220=	0
ΜĒ	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ä	Total (37 CFR 1,16(i))		Minus	**				x \$ =		OR	x \$ =	
Σ	Independent (37 CFR 1,16(h))		Minus	***	·			x \$ =		OR	x s =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))						]			]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
										OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  TRINAL L. RIDDICK/  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".												

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